

STATE OF CALIFORNIA		AGREEMENT NUMBER
STANDARD AGREEMENT		09RCHYR-RC109
STD. 213 (Rev 6/03)		
Registration NUMBER		Federal EIN
		68-0298653

1.	This Agreement is entered into between the State Agency and contractor named below:
STATE AGENCY'S NAME	
OPR/ CaliforniaVolunteers	
CONTRACTOR'S NAME	
California Conservation Corps	
2.	The term of this Agreement is 06/01/2009 through 9/30/2010
3.	The maximum amount of this Agreement after this amendment is: \$1,536,489.00
4.	The parties agree to comply with the terms and conditions of the following exhibits which are by this reference made a part of the Agreement.
Exhibit A, entitled "Program Narrative/Performance Measures"	
Exhibit B, entitled "Budget Form and Budget Narrative"	
Exhibit C*, entitled "General Terms and Conditions"	
This document can be viewed online at http://www.ols.dgs.ca.gov/standard+language	
Exhibit D, entitled "CaliforniaVolunteers Policies and Requirements"	
Exhibit E*, entitled "Federal Regulations and Provisions Governing AmeriCorps Programs"	
This document can be viewed online at	
http://www.americorps.gov/for_organizations/manage/index.asp or	
http://www.americorps.org/pdf/45CFR_chapterXXV.pdf	
Exhibit F, entitled "AmeriCorps Program Assurances and Certificates"	
Exhibit G, entitled "Resource and Reference Materials for Subgrantees"	
Exhibit H*, entitled "2009 Recovery Act Provisions"	
This document can be viewed online at	
http://www.americorps.gov/for_organizations/manage/index.asp	

Items shown with an Asterisk (*), are hereby incorporated by reference and made part of this agreement as if attached hereto.

IN WITNESS WHEREOF, this agreement has been executed by the parties herto.

CONTRACTOR		CALIFORNIA Department of General Services Use Only
CONTRACTOR'S NAME (If other than an individual, state whether a corporation, partnership, etc.)		
California Conservation Corps		
BY (Authorized Signature)	DATE SIGNED (Do not type)	
PRINTED NAME AND TITLE OF PERSON SIGNING		
ADDRESS		
1500 Alamar Way, Fortuna, CA 95540		
STATE OF CALIFORNIA		
AGENCY NAME		
CaliforniaVolunteers		
BY (Authorized Signature)	DATE SIGNED (Do not type)	
PRINTED NAME AND TITLE OF PERSON SIGNING		
Karen Baker, Executive Director		
ADDRESS		
1110 K Street, Suite 210, Sacramento, CA 95814		